Parent Notification of Special Education IEP/Placement/Eligibility Committee Meeting

This notice is sent to parents 7-10 days prior to the meeting date. Every effort should be made to schedule the meeting cooperatively with the student's parent(s). Confirmation of the parent's attendance should be obtained.

To:	Date:
You are invited to a meeting to discuss your child's, services and program. Your participation is very importation committee meeting. Please let us know if you would like convenient time that will permit you to attend. A copy of this letter. You may be accompanied to this meeting by third party, we request three days' notice before the meeting by	education ant! We encourage you to participate in this a us to reschedule this meeting to a more f the Procedural Safeguards is included with a third party if you wish. If you choose to bring a
TIME: DATE	
LOCATION:	
The purpose of this meeting is (check all that apply):	and Eligibility Determination
To determine if your child needs a comprehensive et To discuss your child's evaluation and to determine To determine if your child needs additional assessm To discuss your child's reevaluation and to determine education. Individualized Education Program [IEP] To develop an initial or annual IEP for your child. To review your child's IEP and to revise it, if necessary. To develop or revise your child's transition plan. To determine if your child needs Extended School Year (ESY) services.	if your child is eligible for special education. ent for a reevaluation and to plan the reevaluation. e if your child continues to be eligible for special Other To determine your child's most appropriate placement. To discuss disciplinary actions. To conduct a manifestation determination. To develop, review, or revise a behavior support pl Other:
	Other:
Agency Representative:	
General Education	Other:
Teacher: Special Education Teacher:	Other:
□ Notice of Invitation to Committee Meeting Reply. □ Procedural Safeguards Notice. □ [Other: □ Please respond to this Notice of Invitation to Committee Committee Meeting Reply letter included and returning wor concerns, please contact me using the number below.	vithin 5 days. If you have any additional questions
Sincerely,	Phone Number:
Name and Title	
02/01/17 Special Education: Organization of Ed	ducational Records Policy XII.10.B
NOTICE OF INVITATION TO COM	MMITTEE MEETING REDI V
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e verify your response below and return to the person lis	ted at the bottom of the page within five (
I will attend the meeting at the scheduled time.	
☐ I want to come, but I cannot attend the meeting at the sc	and allow time. Diagno contact we at
(Telephone number)	to make other arrangements. I am available
for the following:	
Date(s)	Time(s)
☐ I will not be able to attend the meeting in person, but wou	ld like to narticinate via telephone
Please contact me at (Telephone number)	at the scheduled meeting time
or at the following times/date(s):	
Date(s)	Time(s)
	45/4***********************************
Parent Signature	Date
Parent Signature	Date
	Date
Please return this form to: NAME & TITLE:	
Please return this form to: NAME & TITLE: SCHOOL:	
Please return this form to: NAME & TITLE: SCHOOL: ADDRESS:	
Please return this form to: NAME & TITLE: SCHOOL:	
Please return this form to: NAME & TITLE: SCHOOL: ADDRESS: TELEPHONE NUMBER:	
Please return this form to: NAME & TITLE: SCHOOL: ADDRESS:	

02/01/17

Special Education: Organization of Educational Records

Policy XII.3.B